

SHADOWOOD CONDOMINIUM ASSOCIATION
11639 Stoneview Square
Reston, VA 20191-2952

2008 UNIT OWNERS STATUS REPORT (UOSR)
(MUST BE FILED BY FEBRUARY 6, 2006)

(1) UNIT OWNER INFORMATION:

Unit Address: _____

Unit Owner(s): _____

Mailing Address: _____

Employer: _____

Phone Numbers: Home: _____ Work: _____ Cell: _____

Spouse Home: _____ Work: _____ Cell: _____

Email Address: _____

(2) MORTGAGE INFORMATION

Mortgage Company: _____

Mailing Address: _____

(3) PROPERTY MANAGEMENT DESIGNATION (PMD)

A PMD form designates a company or an individual to act as the Unit Owner's legal agent before the Association. All Association business will then be transacted through the PMD. If you wish to execute a PMD form, please check here (). If you have already provided a PMD form to the Association, please complete the following:

(Date of Execution) Name: _____
Address: _____

(4) UNIT OWNER LIABILITY INSURANCE

Have you provided the Association with proof of liability insurance in the amount of \$300,000 to? Yes () No ()

(Over)

(5) LEASING OF UNIT (*complete only if unit is being leased*)

- (a) Is a current lease on file with the Association? Yes () No ()
(b) Effective date of lease _____ Expiration date of lease _____
(c) Is an Exhibit "A" and "B" on file with the Association (Second and Third
Amendments to the By-Laws)? Yes () No ()
(d) Has the Tenant provided proof of liability insurance in the amount of
\$300,000? Yes () No ()

(6) OCCUPANCY OF UNIT

Please provide the names and phone numbers of **ALL OCCUPANTS** of this unit.
Provide the age of individuals **ONLY IF THE ARE UNDER 18 YEARS OF AGE.**

<u>Name</u>	<u>Age</u>	<u>Home Phone</u>	<u>Work Phone</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(7) SIGNATURES

I certify that I am the recognized owner of the unit designated on this form (according to the Virginia Condominium Act and Shadowood Condominium Association Policy Resolution 85-03 - Ownership) or the legally designated Property Manager and that a valid PMD form has been filed with the Association. To the best of my knowledge, the information contained on this UOSR is complete and correct, and that all required documents have been filed with the Association.

Date _____

Print Name _____

Unit Owner(s) Signature _____

Property Manager (PMD) Signature _____